Health and Medical Education Challenges in the Middle East: Syria as a Case Study

July 9, 2020

10:00am-11:00am EDT



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If we don't end war, war will end us. --H. G. Wells

"Mankind must put an end to war before war puts an end to mankind", President John Kennedy

Syrian people were forced to be indulged in a war, to participate in a war, to be killed, tortured, displaced; to be dreamless, hopeless, smile-less and to lose all wishes, to leave their houses and to be humiliated in all possible ways and the world did nothing to them.





As you all know, and going back to before 2011, health and medical education was very common in the Arab region and in Syria in particular in which, a doctor is seen as at the highest levels and ranks of the social structure for jobs and positions. That was because all people respect doctors for their great role in protecting others and saving their lives.



As a result of the state of stability that Syria was experiencing before 2011, the doctor's focus was on dealing with cold cases

(Bearing in mind that the last war in Syria was in 1973, and then the genocide in Hama in 1982)



No enough materials related to Hama's genocide at that time

As a result, there was no focus on medical education related to war or the so-called term, war medicine.

Pre-hospital phase

Having in mind the stability of the educational process at the Syrian Universities in the period between 1983 and 2010, these universities have witnessed stability in their educational methodology and teaching standards followed with the distinction of several universities outside Syria (I mean with regard to graduates obtaining job opportunities in the Arab Gulf region) such as the University of Aleppo The University of Damascus and the University of Tishreen.

It was very common for a graduate to travel to work at gulf countries



With signs of the start of the Arab Spring in late 2010 and the beginning of the year 2011

With the occurrence of radical changes in a number of neighboring Arab countries, the dreams of the Syrians were at the beginning of some political freedoms, removing the security grip, allowing democratic practices, removing Article 8 of the Syrian constitution, and canceling the state of emergency that has been in place since the 1960s.

Arab Spring



Arab Spring

Like those practices that took place in countries where popular revolts have succeeded, such as Tunisia and Egypt, or with reforms in other countries, the Syrians never thought that a storm of change could destroy their country and turn their spring into autumn.



The ominous prophecy of the bible came true! As Isaiah 17:1 declared it loudly. Behold, Damascus will cease to be a city and will become a heap of ruins



"BEHOLD, DAMASCUS WILL CEASE FROM BEING A CITY, AND IT WILL BE A RUINOUS HEAP." -Isaiah 17:1

Destruction

Not only Damascus became a heap of ruins, most major cities of Syria were the same



Blood

Behind them lies a black night of the detainees, the injured, the displaced and the deceased under torture (Caesar leaks) and millions of refugees to neighboring countries, European countries and all countries of the world.

Caesar Syria Civilian Protection as you all know, and that was signed by president Trump is for anonymous solder who had leaked 55000 pictures for 11000 people were killed under torture.

This picture is for a friend of mine and we were studying together and he was arrested in 2014 and was killed under torture in June 2014.

Those people had dreams, had a life, had prospects, each one of them had a family, a crying mother or a waiting wife. THOSE PEOPLE WERE HUMAN PEOPLE AND NOT JUST NUMBERS.



During this war, we had lost thousands of thinkers, talented and academic personalities such as:

Bassel Khartabil

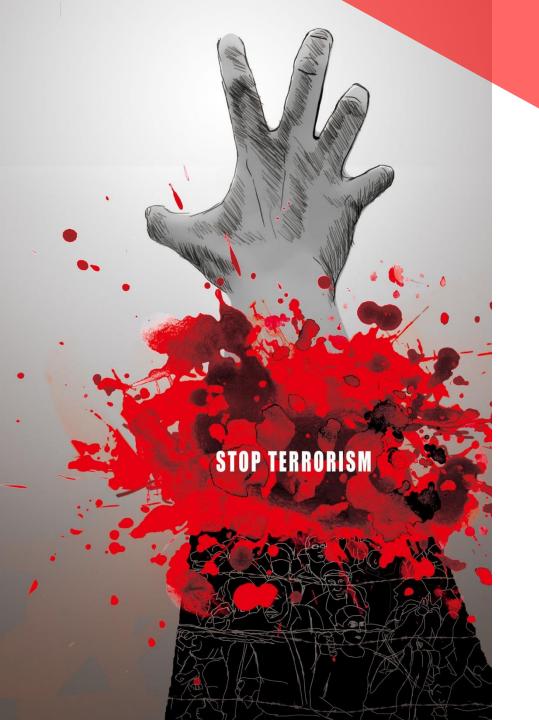


Razan Zaitouneh

Victims of war



Rania Al-Abbasi



Terrorism



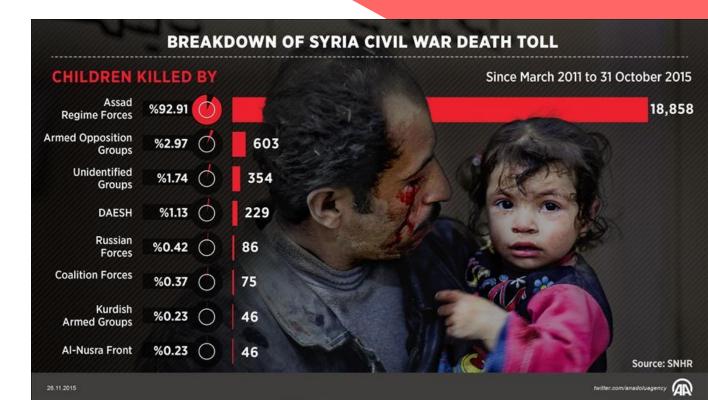
During the last few years, this word was being used day and night to address civilians who are living in Idleb. Regime allies were attacking and destroying terrorists but would you please define this word??
Who is a terrorist?

Up till now, there is no specific definition for the word. To kill a civilian and pretend that he is a terrorist does not give you the right to kill him.

Calling him a terrorist does not make him terrorist!!!



Terrorism



You do not have the right to kill anyone just and only because you can.

You do not have the privilege to kill civilians and simple call them terrorists.

And the most important point is that how is it ethical to do that?

People were killed for no reason. They were tortured for no reason and they lost their life for no reason. Is that a humanitarian action?





Terrorism



Syrian Children are **Besieged Displaced Bombed Sniped** Massacred **Detained Tortured** Raped **Mutilated** Gassed **Starved** by **Assad** Regime since 2011 **Uprising**

Dead

Returning to the health and medical impact, as I mentioned earlier, there was no focus on dealing with cold cases prior to 2011 in the educational curricula in Syria, and here was the obstacle that thousands of injured Syrians paid for their lives as a result of fatal medical errors in dealing with cases of injury.

Syrian war began in March 2011 with a steady escalation in killings, a steady escalation in the use of weapons, a steady escalation in the amount of violence used, and a steady increase in the number of casualties as a result of the use of heavy weapons to suppress the cities that witnessed these protests

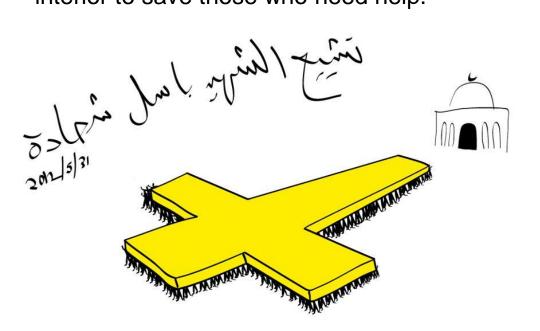
Refugees Waves



With the beginning of the year 2012, and with signs of a population escaped from war towards the Lebanese, Turkish and Jordanian borders, and from there to these countries. Most of those waves occurred in 2014-2015

Opposite Direction

The beginnings of the reverse campaigns appeared from a number of academics, doctors, thinkers and researchers who found an urgent need for their presence in the Syrian interior to save those who need help.







And from this point in particular, there seems to signs of establishing educational groups specializing in dealing with hot cases of injury and dealing with the injured in the pre-hospital stage so that there is the ability to save the life of the injured

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Dear all, Many thanks for having this opportunity

I know that I am talking in this webinar while hundreds are joining us, I know that thousands might watch us later, but in truth, I am sure, 100%, that millions of Syrian people would wish to get such a chance to talk and express about their pain



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They would talk about how painful it is to lose a close friend.

how painful it is for a mother to lose her sole son

How painful for a wife to lose her husband

How painful for a woman to answer questions of her son who is asking her about his father at the same moment she does not know where he is, whether he is alive or dead!



How painful for an old man to have his house destroyed and to be forced to live in a tent.. a blue tent, a blue stupid shit tent. Blue is supposed to be the color of the sky, why it is the color of our migration? Why it is the color of our gloom and sadness? Why it is the color of our ambiguous future?

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We know that justice would prevail one day, sooner or later, in a way or another, in this life or in the other life, justice will reveal.

I know and I am sure, just like Billy Graham, the American evangelist once said, I never saw a U-Haul behind a hearse.

When it is the moment of death, you will never take with you your treasures and money. All you will take is your good deeds, and if you were hurting people in this life, moans of their tortured souls will lead you to the gate of hell.

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War

Coming back to the Syrian war in 2012, areas liberated from the regime's control were bombed and targeted with bombs, airplanes, and heavy weapons. As a result, all civil, educational, and medical bodies and institutions were targeted, leading to their destruction, which led to complete dependence on field hospitals and education.

Those field hospitals were taking places in homes and houses for the rapid treatment of the injured. When it is about schools and universities, areas liberated from regime faced organized targeting of the educational buildings over and over again.



Perhaps one of the cases of this targeting is the regime's bombing of the Hass School, countryside of Idleb on October 26, 2016, in which dozens of children and teachers were killed in the school. Many other cases of targeting educational and medical institutions happened during the last few years.

Hass School



Myrters of AHS

Headquarter of the academy was targeted many times and many students and faculty members passed away during those attacks







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We return to the idea of higher education. There has never been any educational institution concerned with higher education before 2015. After that date, many local universities started to appear such as Alshamal private University, Idleb University, Mary University and Alshahba University.



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For me personally, I went back to Syria for two reasons:

First: Trying to provide medical assistance to those who are in need of emergency medicine, having in mind that paramedics program was not taught in Syria before the war.

Second: An attempt to establish an educational body that could satisfy the severe shortage in the number of doctors, who were forced to travel or killed or arrested.



We started the idea of this academic institution by providing short-duration courses (not exceeding two weeks) in first aid, first responders, and EMT-B.

The main objective of these courses was to save the life of the victims (taking into account of mass casualities, and the severe shortage of paramedics).

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After we partially covered the gap in the field, (after we trained about 1,000 trainees to do first aid and deal with direct injuries), we believed that we should go ahead and improve our courses.



We thought about developing the teaching process to turn into a comprehensive educational methodology for institutions of higher education

In this regards, we moved from intensive short-term training courses to the academic methodology that adopts international academic curricula

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We planned to satisfy the need of the field and the need for the labor market for our courses There was a need to communicate and deal with local rescue institutions such as Civil Defense and White Helmets. Therefore, the Civil Defense course was added. We taught the courses 50% in English in order to keep pace with scientific development besides giving students an opportunity for future development.

Our courses became one single coherent structure that supports the student, the labor market, and the community's needs.

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Hence, the duration of the study was 4 years and due to the instability of political and military conditions in Syria, we reduced the course to be two years-course while doing our best to keep quality of teaching and materials that are being taught, not being affected by this reduction.



In the beginning, our focus was restricted to paramedics.

After that, and due to the great need, we developed our courses in a way that can simulate the chain of survival:

Pre- hospital, hospital, post- hospital





Pre-hospital

The pre-hospital stage is identical to the

Paramedics program, and its aim is to save the life

of the injured in the first golden moments of the

injury and preserve life as much as possible.

Hospital

The hospital stage is identical to the Nursing program, and its goal is to support the patient or injured who arrived at the hospital, and provide all requirements in order to overcome the situation of danger.



Post-Hospital

The post-hospital stage is identical to the Physical Therapy program.

The aim of this program is to rehabilitate the patient or the injured after leaving the hospital and to provide psychological and physical therapy and rehabilitation after the injury in order to help this person to be a successful member of society.



Post-Hospital

It is worth mentioning that this program is important taking into account that there are more than 1.9 million disabilities in Syria as a result of the war. This program can also provide specialized physical therapists for the post-war phase



The circumstances were very difficult, but we had a great insistence on overcoming the difficulties, bridging the existing gap, and providing everything possible that can help the society.



Correct concepts of medical practice were our focus taking into account that the wrong practices that were applied were the indirect reason for the death of a large number of injured people.

In addition to the academic program that we teach, we provided professional diplomas for nurses and doctors for the purpose of providing the best means to preserve the lives of the injured, such as critical care transport, dealing with chemicals weapons, BLS courses, ACLS, and infection control. For the moment, we are focusing on COVID19.



Many of our graduates are currently working in field hospitals supported by NGOs in Idleb in addition to hospitals located within the Turkish control-areas in Northern Syria.



What distinguishes Academy of Health Sciences is that we are more open to the world because we work directly without any limits, restrictions, or bureaucracy that restrict work, activity, communication, and correspondence.







In addition to the network of partners we have, and the accreditation of our programs from one of the European accreditation institutions, we still, will and plan to face all challenges and difficulties that we have.





WE FAIL TO PLAN NOT PLAN TO FAIL.







When we talk about learning and teaching in Syria before war, we have to mention that learning is still traditional, and characterized by a teacher-centered approach.

This traditional method centered on the teacher who is controlling the course content and the methods of presentation i.e. focusing on teacher rather than student.

Traditional teaching

The modern style of medical education has not yet been introduced.

This method depends on a student-centered approach in which the students are encouraged to take greater responsibility for learning decisions and to question what and how they learn; while they are

supervised by a mentor.

Because we don't have any traditional methods so our courses are following the modern style.

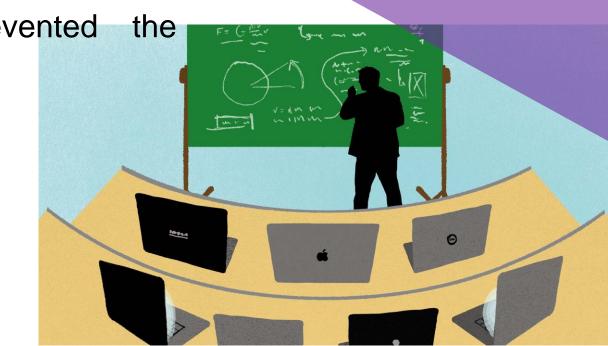


War in Syria has left the country's higher education system "fragmented and broken". The focus on traditional teaching

"fragmented and broken". The focus on traditional teaching

and hospital-oriented education has prevented the

appropriate response to community needs.



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In June, 18th, 2019, Cambridge University has published a

study entitled: "Syrian higher education system facing

'complete breakdown' after eight years of war"



The conflict in Syria has left the country's higher education system "fragmented and broken", with universities suffering politicisation, militarisation and human rights violations including disappearances and murder, according to researchers from the University of Cambridge and Syrian academics in exile.

One of the professors was dragged away by two security officials in front of the students. That professor was taken to prison and charged because of his political views

Syrian academic

The report's findings were drawn from existing academic research and "grey" literature such as news and NGO reports, together with 117 remote interviews with university staff and students still in Syria conducted by compatriot academics in exile, focus group discussions and personal testimonies from 19 Syrian academics living in exile in Turkey.



In addition to that, Syria's brain drain of faculty members has the most damaging effects on education. Until the end of 2012 education was in a good state because most of the Professors were still there'. Yet 2013 witnessed the beginning of a mass immigration of university professors.

Can you imagine the number in 2020?

We know the numbers of professors is very low for that reason we are doing our bests to help our students in order to be the best graduates

Official sources estimate that by 2015, after four years of war,

Syria had lost approximately one-third of its Professors.

This loss of human resources is compounded by academics

being removed from their posts for political reasons.

Many of the best qualified Professors left as they had the best job prospects abroad. Experienced Professors were replaced by much less qualified ones.

Secondly, Syria's war economy places major burdens on higher education. It is very difficult for a faculty member to teach and prepare researches while his financial conditions are not good enough.

Attendance rates of students have fluctuated rapidly as environmental conditions pose severe obstacles to simply attending university. In particular, male students stay at home to avoid forcible arrest at military checkpoints. With many such checkpoints across Syrian cities, travel times to campus have in many areas become very long, thus student preferred to stop attending lectures leading to negative effects of their understanding for the courses they have already admitted to.



Many universities and institutes are not being repaired due to the "high probability" they may get targeted and damaged again. How sad this would be!



Medical Faculties and institutes struggling to modernize are methodologies and to move towards an integrated model that produce health-oriented can professionals who are able to work health promotion, disease for prevention, and cure.



As with other service sectors that have gradually grown according to need, interest, and priority in Idleb. The growth of the medical sector in the city has been natural, ranging from field medical centers to hospitals and health centers, subject to coherent administrative organization and structures.

Variable: Mean (SD)	n=246	Mean score NMUE (SD)	P
Number of hours spent studying per day		Total: 7.8 (3.62)	0.0029
A. 0-3	A. 24	A. 66.47 (6.37)	A versus B >0.05
B. 4-7	B. 100	B. 68.62 (6.44)	A versus C >0.05
C. 8-11	C.86	C. 69.03 (6.93)	A versus D < 0.00
D. 12-15	D. 26	D. 73.11 (8.03)	A versus E < 0.000
E.>15	E. 10	E. 79.8 (10.37)	B versus C >0.05
			B versus D < 0.00
			B versus E < 0.000
			C versus D < 0.05
			C versus E < 0.000
			D versus E < 0.05
Number of preparation months		Total: 4.36 (3.08)	0.21
A. 0-3 months	A. 118	A. 69 (8.05)	A versus B >0.05
B. 4-7 months	B. 90	B. 70.31 (6.51)	A versus C >0.05
C. 8-12 months	C.32	C. 70 (7.37)	A versus D >0.05
D.>I year	D. 6	D. 64.5 (0.54)	B versus C >0.05
			B versus D >0.05
			C versus D >0.05
Number of questions completed		Total: 1700 (1380)	<0.0001
A. 0	A.0	A. 0	
B. 1-2000	B. 158	B. 70.03 (7.19)	B versus C < 0.00
C. 2000-4000	C. 44	C. 66.68 (6.37)	B versus D >0.05
D. >4000	D. 44	D. 70.38 (8.49)	C versus D < 0.05
Percentage of study time doing questions (%)		Total: 33.57 (22.53)	0.019
A. 0	A.0	A. 0	
B. 1-40	B. 175	B. 69.98 (7.38)	B versus C < 0.05
C. 41-80	C. 64	C. 68.1 (6.98)	B versus D >0.05
D. 81-100	D.7	D. 69.85 (10.66)	C versus D >0.05
Percentage of study time in group (%)	0.000	Total: 26.01 (27.3)	0.47
A. 0	A. 79	A.70.16 (7.6)	A versus B >0.05
B. 1-40	B. 101	B. 69.76 (6.96)	A versus C >0.05
C. 41-80	C. 58	C. 68.29 (8.12)	A versus D >0.05
D. 81-100	D. 8	D. 68.25 (4.62)	B versus C >0.05
			B versus D >0.05
21 N - 10 (N21 1202 1 T21 N2			C versus D >0.05
Syrian scientific high school exam	2020	Total: 228.98 (11.22)	<0.0001
A. <200	A.8	A. 61.12 (9.28)	A versus B >0.05
B. 200-210	B. 13	B. 63.38 (4.17)	A versus C >0.05
C. 211-220	C. 23	C. 65.87 (5.17)	A versus D >0.05
D.221-230 E.231-240	D. 27	D. 67.7 (5.64)	A versus E <0.00
	E. 175	E. 71.08 (7.31)	B versus C >0.05
			B versus D >0.05
			B versus E < 0.00 C versus D > 0.05
			C versus E <0.00
C 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.		T1 75 07 (7.4)	D versus E >0.05
Cumulative medical school class grades (%) A. 60-70	A. 47	Total: 75.07 (7.6)	<0.0001
A. 60-70 B. 70.1-80	A. 47 B. 155	A. 64.42 (4.1)	A versus B < 0.00 A versus C < 0.00
C. 80.1-90	B. 155 C. 44	B. 69.8 (6.96)	A versus C <0.00
C. 80.1-90 D. Above 90	C. 44	C. 74.93 (7.01)	B versus C < 0.00
P value is considered significant when it is <0.05. NMUE: Nati			-

This transition between emergency response (emergency action) and organized care is made according to the needs of the region. In the period of bombing and military targeting, the medical response is limited to fulfilling the damage caused by military actions on the ground for both wounded and injured people.



However, when the region is in a state of stability, the organizations and institutions concerned are able to move forward to expand health services. We are waiting for this stability in order to achieve this transitional state.

Moving towards improving medical performance in general, both at the level of the type of medical services, their numbers, centers, and facilities, this improvement is associated with the decline of military operations in the region to a large extent. However; the medical sector is still facing other challenges.

The challenges are too many and due to absence of time I would like to talk about few of them.



The medical education in Syria faces multiple challenges that are represented by many factors including, but not limited to, old curriculum, traditional teaching methods, and unavailability of the proper facilities. Colleges are concentrating more on students' attendance and less on updating the curriculum-which is sometimes outdated.

The situation of medical education in Syria is **complex** and determined by many factors, including politics, financial matter, planning, and security situation. At present, the strategic plan to shape the future of medical education in Syria is **vague** due to the unstable military and political situation, camps spreading and enlarging numbers of refugees, and also there unknown future of all people in Syria.



These challenging settings, combined with the immigration of skilled doctors, have led to pressure on junior staff to act beyond their capabilities and significant psychological strain. For instance, medical students, nurses or pharmacists are forced to work as trauma surgeons or anesthetic technicians to take sole responsibility for anaesthetizing patients.

The high levels of trauma witnessed, together with the inadequate resources to hand and the inability to provide for their families, have resulted in secondary trauma to health staff working inside Syria. Numerous studies around the world have shown that armed conflict affects the civilian population and cause disparate long-term psychological and mental effects, which make adaptation of youth and children in the future a difficult process, and make peace and security more difficult.

The results of these studies apply to the Syrian reality, especially in the northwestern region of Syria, because we have been suffering for nine years from bombing, displacement, torture, injustice, detention and many others.



The university students who led and participated in the Syrian revolution since its inception on 15/3/2011 are now young people participating in resisting the criminal regime, where they presented hundreds of martyrs, injured and detainees in defense of our right to live in freedom and dignity, where they were also subjected to injustice, persecution, arrest, abuse, and other repressive methods, which left them with various negative psychological effects.



As a result of the traumatic events and the many crises and stressors that university students were exposed to, especially that their childhood stage was during the war, they suffer from behavioral problems such as aggressive and impulsive behavior, the inability to plan for the future, recklessness, neglecting personal safety, the safety of others, predication, and aggression in terms of repeated physical quarrels.



In addition to personal problems Such as feeling deficient, introverted behavior, difficulty making daily decisions, physical problems such as headache, joint pain, sleep difficulties, lack of appetite, and academic problems such as school delay, lack of educational achievement, poor attention and concentration, and amnesia.

They also have many negative feelings, such as feelings of anger, anxiety, blame, shame, sadness, guilt, despair, impotence, and worthlessness.





University students have been exposed to many social and environmental factors that cause mental illness, including: traumatic events in childhood (such as the death of a parent 11 years ago, divorce of parents, and dependency education), deposition of traumatic life events (such as the death of a loved one, separation from the lover), and exposure to more than stressors at the same time and the length of time being exposed to the stressors, loss and the ensuing process of grief,



the absence of social and emotional support when exposed to stress, and traumatic events such as watching the incident of killing another person, torture and exposure to an accident threatening the life of the person and his family, in addition to poverty and displacement. Not forgetting Physical, psychological and sexual abuse, Child labor, Early marriage, and school dropout.



As a result of the social and environmental factors that cause psychiatric diseases that university students have been exposed to, the prevalence of mental illnesses has increased especially: Major Depressive Disorder, Persistent Depressive Disorder (Dysthymic Disorder), Bipolar Disorder, Cyclothymic Disorder, Post-Traumatic Stress Disorder, Illness Anxiety Disorder, Social Anxiety Disorder, Agora Phobia, Panic Disorder, Obsessive Compulsive Disorder, Schizophrenia and Other Psychotic Disorders, Substances-Related Disorders, especially Abuse or Dependence on Amphetamines, Nicotine, Opiates, Cannabis, Inhalants, and Anti-Anxiety, Dissociative Amnesia, Personality Disorders, especially Antisocial Personality Disorder.



In young children, Bedwetting and Attention Deficit Hyperactivity and

Post-Traumatic Stress Disorder increased.

